Apr-09 Jul-09 Sep-09 Dec-09

7-Day Average

Other Important Metrics

CD youth tx admissions: 12mo avg: 100.4 (12mo avg Dec04: 89; Dec06: 63; Dec07: 81; Dec08: 82.5; Dec09: 99.6)

Boarding: Jan-Mar10: 141 (mo.avg: 47.0); Jan-Dec09: 425 (mo. avg: 35.4); Jan-Dec08: 801 (mo. avg: 66.8); Jan-Dec07: 399 (mo. avg: 33.3)

PACT: engaged - 6; enrolled - 175 (on 3/31/10) Team capacity: 180

FACT: FACT is now fully enrolled with 50 clients.

Other Notable Items

Time Frame 1Q10 through 3Q10

MIDD implementation: During the 1st quarter of 2010, RFPs were issued for the Crisis Diversion Facility (10B), Parent Partner and Youth Peer Support (1F), and for School-Based Mental Health and Substance Abuse Services (4C). Awards were made for 4C; awards for 1F and 10B are anticipated in the 2nd and 3rd quarters respectively.

An evaluation of first year outcomes for 94 individuals enrolled in the PACT program, which serves severely mentally ill adults, found a 47 percent decrease in psychiatric hospitalizations, a 77 percent decrease in days spent in psychiatric hospitals, and a 103 percent increase in their days spent in the community. Retention was 94 percent.

--MHCADSD was awarded a Corporation for Supportive Housing grant to support

Key

MH: Mental Health
CD: Chemical Dependency
PACT: Program for Assertive
Community Treatment

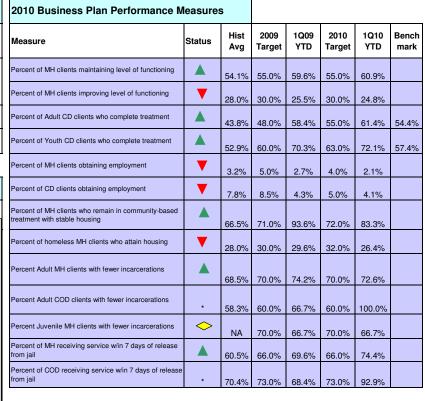
FACT: Forensic Assertive Community

Treatment

MIDD: Mental Illness and Drug Dependency Action Plan COD: Co-occuring Disorders PALS: Program for Adaptive Living

Services

RFP: Request for Proposals WSH: Western State Hospital



Update on the division's 2010 Equity & Social Justice Initiative work

Preparation work has occurred on the CD side for comparing treatment outcomes by ethnicity for clients treated by ethnically-specific agencies versus more generic agencies. Comparison agencies have been selected for review. On the MH side, a sample of 818 individuals on atypical antipsychotic medications screened for metabolic syndrome has been analyzed for statistically significant differences by ethnicity.

Division Director's Message

We are doing quite well in assuring that individuals with mental illness and with co-occurring mental illness and substance use disorders are receiving services within seven days of release from jail, exceeding our historical average, last year's performance and our current targets. We are exceeding targets for helping individuals with mental illness maintain their housing, but are somewhat below target for helping individuals attain housing. This should improve as additional supported housing programs come on line later this year. We are actively involved in candidate selection for Humphrey House, a program for chronically homeless jail recidivists with mental illness or substance abuse problems. We continue to fall below target on clients obtaining new employment. In an effort to improve employment outcomes, we are providing contractors with financial incentives tied to agency-specific targets for client employment attainment. We are also strengthening fidelity assessment of supported employment programs and continue to invest state and count financial resources in this area. Boarding is up from last year. It continues to be difficult to place medically complex individuals who need psychiatric hospitalization.

Improving/Target Achievable =

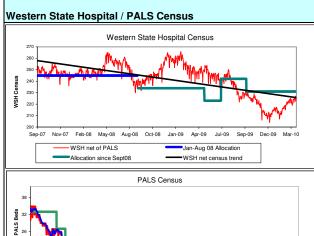
Watch/Target at risk =

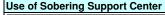


Unfavorable trend/Target not attainable =

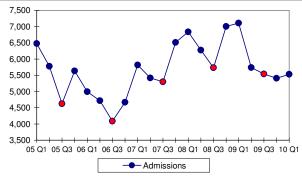


* Measures with no indicator have numbers too small to evaluate





Sep-07 Nov-07 Feb-08 May-08 Aug-08 Oct-08 Jan-09



(Use of the Sobering Support Center is usually lower during the warmer months. Those quarters have red markers.)

This graph shows the use of the Dutch Shisler Sobering Support Center and the impact of the 1811 Eastlake project starting in early 2006. This Housing First program diverted a number of the highest users of the Sobering Support Center into a housing program with other supportive services. MIDD-funded Housing First and other supported housing programs, MIDD-funded expansion of treatment access, and improved service coordination led to another decline in admissions in 2009, with a very small increase in the first quarter of 2010. Since the first quarter of 2009, the number of unduplicated people admitted has been fairly constant.